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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS

Application Number	10/071,544
Filing Date	02/09/2002
First Named Inventor	Erland Wittkotter
Art Unit	2132
Examiner Name	Kambiz Znd
Attorney Docket Number	W227-US2

I hereby revoke all previous powers of attorney given in the above-identified application.										
A Power of Attorney is submitted herewith.										
OR I hereby appoint the practitioners associated with the Customer Number:										
Please change the correspondence address for the above-identified application to: The address associated with Customer Number: OR										
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I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)										
SIGNATURE of Applicant or Assignee of Record										
Signature (/) All Mod										
Name	Erland Wittko	cotter cotter								
Date	05/02/2006	Telephone 510-690-0412								
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.										
*Total offorms are submitted.										

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Serial No.: 10/071,544 Examiner: Kambiz Zand Attorney Docket No.: W227-US2

Applicant has made a good faith to resolve the issues regard the non-compliant amendment issued by the Examiner.

Respectfully submitted,

Dr. Frland Wittkotter

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